

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: CATHETER WITH PUNCTURE SENSOR

Attorney Docket Number:: 011350-332

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 15

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Takashi

Middle Name:

Family Name: UENO

Name Suffix:

City of Residence: Fukuoka

State or Province of Residence: Fukuoka

Country of Residence: Japan

Street of Mailing Address: 2-9-1-418, Nishijin, Sawaraku

City of Mailing Address: Fukuoka

State or Province of Mailing Address: Fukuoka

Country of Mailing Address: Japan

Postal or Zip Code of Mailing Address: 814-0002

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Takashi
Middle Name::	
Family Name::	YAMAMOTO
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	c/o Terumo Kabushiki Kaisha, 1500, Inokuchi, Nakai-machi
City of Mailing Address::	Ashigarakami-gun
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	259-0151
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yoshitaka
Middle Name::	
Family Name::	OOMURA
Name Suffix::	

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing
Address:: 259-0151

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Tetsuo

Middle Name::

Family Name:: TANAKA

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 259-0151

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2003-090225	03/28/03	Yes

Assignee Information

Assignee Name:: Terumo Kabushiki Kaisha

Street of Mailing Address:: 44-1, Hatagaya 2-chome

City of Mailing Address:: Shibuya-ku

State or Province of Mailing Address:: Tokyo

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 151-0072